

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS													
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>												
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>												
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>												
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>													
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector								
Doc/Data																			
Equip/Tooling																			
Operator																			
Material																			
Setup																			
Other																			
Process																			
Supplier																			
Training																			
Unapproved																			
FAULT CATEGORY																			
Landing Gear				General															
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspector Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions								<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
																<input type="checkbox"/> Other			

Work Order ID 95336***95336***

Page 2

January-09-13 10:15:31 AM

Item ID: D3023-1

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Back Panel

Stop

NS2

Start Date: 1/21/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

120

QC

Quality Control

QC8- Inspect parts - second check

0.00

Sm
B-2.5

J

130

130

Brake NC

Brake NC

Form as per dwg

0.00

/
 Sm 1302105

Memo

0.00

140

140

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

Sm
B-2.5/
 Sm 1302105

Memo

0.00

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS						
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	Bending <input type="checkbox"/>	Grain <input type="checkbox"/>							Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>	
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>							Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>	
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>							Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>	
	Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>							Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>	
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>							Part Moved <input type="checkbox"/>		
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>							Positioned Wrong <input type="checkbox"/>		
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>							Power Loss/Surge <input type="checkbox"/>		
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>							Other <input type="checkbox"/>		
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>									
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>									
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>									

Work Order ID 95336***95336***

Page 3

January-09-13 10:15:31 AM

Item ID: D3023-1

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Back Panel

Stop

NS2

Start Date: 1/21/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

180

180

Packaging

Packaging

Identify as per dwg & Stock Location: *W/4 001*

0.00

*0**13-2-5*

190

190

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

*13/2/6 8**AB025*

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____		Rework	Scrap	Use-as-is	Skid-tube	Crosstube	Water Jet	Engineering		
NCR No. _____		Work Order Update			Machining	Small Fab	Prod. Eng. Coor.	Quality		
					Thermoforming	Finishing	Rec/Store/Packaging	Other		
					Large Fab	Composite	Supplier			
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear				General						
				Bending	Bend	Grain	Ovalized	Pressure/Forced		
Centre Not Concentric to O/S				BOM/Route	Hardware	Over/Under tolerance	Temperature/Cure			
Cracks				Broken/Damaged	Inspection Incomplete	Part Incorrect	Weld			
Crushed/Crimped.				Burrs	Instructions Incomplete/Unclear	Part Lost/Missing	Wrong Stock Pulled			
Cuffs				Contamination	Maintenance	Part Moved				
Heat Treat				Countersink	Mislabeled	Positioned Wrong				
Inspection Strip in Tube				Cut Too Short	Misread	Power Loss/Surge				
Ripples in Bend				Drill Holes	Offset					
Torque Waves in Extrusion				Drawing	Out of Calibration					
Turning Sequence				Finish	Out of Sequence					
Wave/Twist in Tube				Folio	Outside Dimensions					

Picklist Print

January-09-13 10:15:31 AM

Page 1

Work Order ID: 95336

Parent Item: D3023-1

Start Date: 1/21/13

Required Date: 1/21/13

Parent Item Name: Back Panel

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP C02.01.23Revised NG
IPP Rev:D 08-04-16 now water jet DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M2024T3S.032 2024-T3 .032 sheet		Purchased	No			100	sf	370.1522	2.8777	3.0291579 3.1			

Location	Loc Qty	Loc Code
MAT022	370.1522	
118243	32.4962	
118523	141	
121309	68.656	
123096	27.6	
123574	100.4	123574

Jm 3-2-4

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS							
Part No. _____		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
NCR No. _____		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>					
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>						
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>						
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>						
	Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>						
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>							
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Other <input type="checkbox"/>							
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>								
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>								
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>								

DART AEROSPACE LTD		Work Order:	95336
Description: Back Panel		Part Number:	D3023-1
Inspection Dwg: D3023 Rev: A		Page 1 of 1	

FIRST ARTICLE INSPECTION CHECKLIST

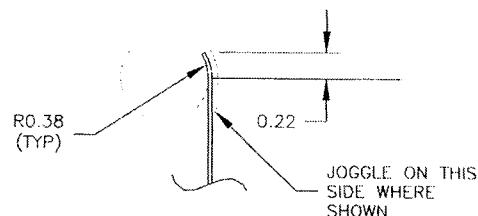
First Article Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø0.128	+0.005/-0.001	0.122"	-		✓	Jkma1
Ø0.191	+0.005/-0.001	0.193"	-		✓	
1.660	+/-0.010	1.664"	-		✓	
0.375	+/-0.010	0.378"	-		✓	
1.340	+/-0.010	1.341"	-		✓	
2.375	+/-0.010	2.376"	-		✓	
0.375	+/-0.010	0.377"	-		✓	
25.28	+/-0.030	25.26"	-		T	Jkma6
27.03	+/-0.030	27.03"	-		T	
28.10	+/-0.030	28.10"	-		T	
1.30	+/-0.030	1.309"	-		✓	
2.375	+/-0.010	2.378"	-		✓	
8.711	+/-0.010	8.712"	-		✓	Prototype
5.597	+/-0.010	5.597"	-		✓	
8.57	+/-0.030	8.578"	-		✓	
1.970	+/-0.010	1.975"	-		✓	
7.42	+/-0.030	7.420"	-		✓	
10.92	+/-0.030	10.920"	-		✓	
14.75	+/-0.030	14.75"	-		T	

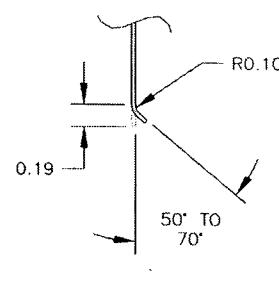
Measured by:	JM	Audited by:	SMR	Prototype Approval:	N/A
Date:	13-2-4	Date:	13-2-5	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	08.11.27	New Issue	KJ/EC	DA

SECTION A-A
SCALE 1:1
(TYPICAL, EXCEPT WHERE SHOWN)

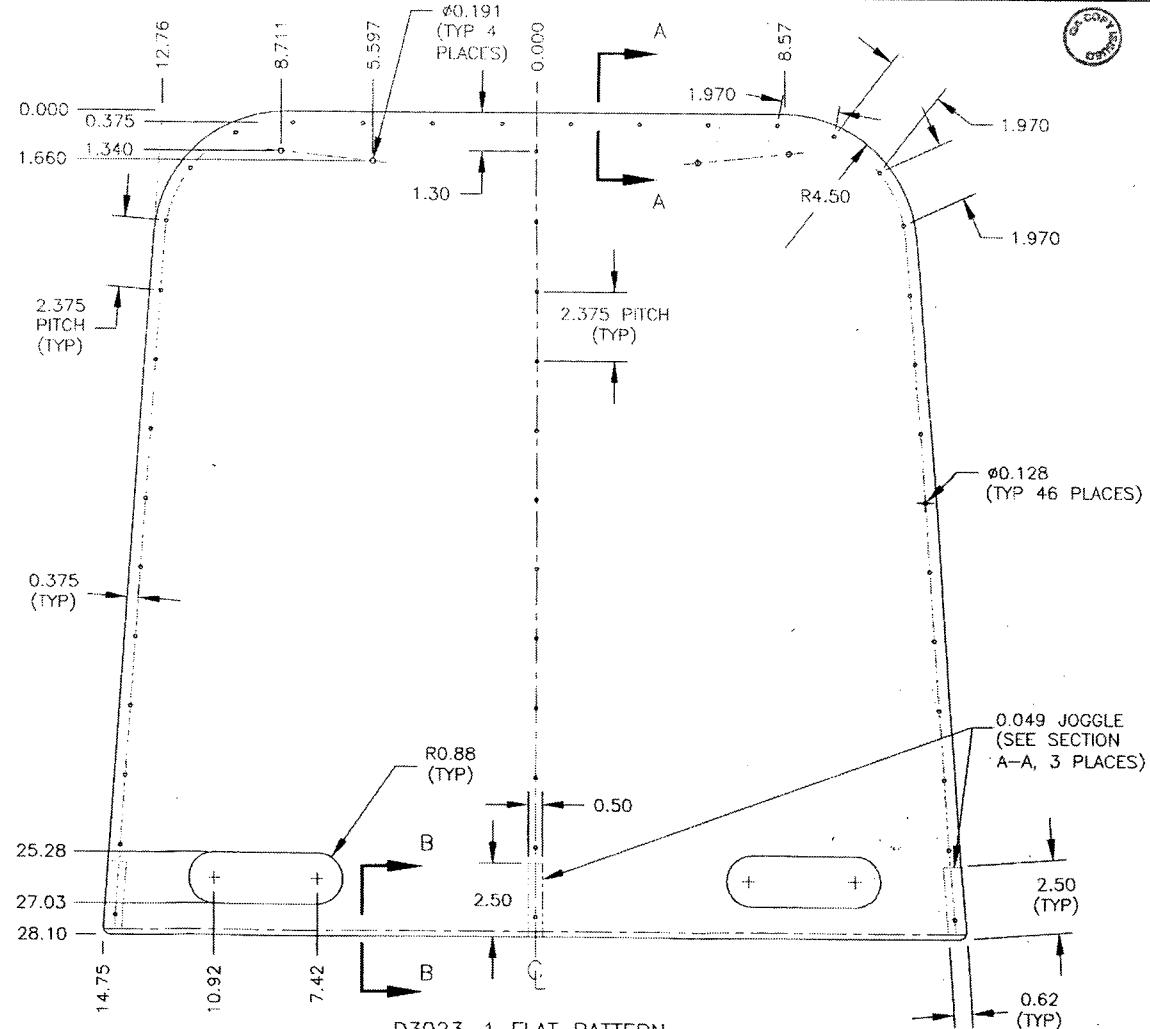


SECTION B-B
SCALE 1:1
(BOTTOM EDGE ONLY)



RELEASED
01.06.07

D3023-1 BEND DETAIL



D3023-1 BACK PANEL

- 1) MATERIAL: 2024-T3 (QQ-A-250/4) 0.032 THICK
2) FINISH: ACID ETCH & ALODINE PER DART QSI 005 4.1
POWDER COAT GREY SANTEX (REF 4.3.5.6) PER DART QSI 005 4.3
3) ALL DIMENSIONS ARE IN INCHES.
4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.

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OR COPIED OR COMMUNICATED TO ANY OTHER
PERSON WITHOUT WRITTEN PERMISSION FROM
PASTOR ERNESTO GOMEZ, M.D.

A	01.05.18	NEW ISSUE
DESIGN	DRAWN BY	DART AEROSPACE LTD. HAWKSBURY, ONTARIO, CANADA
CHECKED	APPROVED	DRAWING NO. REV. A D3023
DATE	TITLE	
01.05.18	BACK PANEL	

SHOP CLOTHES

RETURN TO

ENGINEERING

UNCONTROLLED COPY

SUBJECT TO AMENDMENT

WITHOUT SOURCE

WORKERS

95336 MCS

13-01-11